

his own party who are now in a panic about their reelection. To the American people, to the people I represent in Nebraska, this is far too little and far too late.

In 2010, the administration's own rule on this subject showed as many as 80 percent of small business plans and 69 percent of all business plans would lose their grandfathered status. I went to the Senate floor at the time to warn about it. Everyone on this side of the aisle voted to cancel this ill-advised ObamaCare regulation. Let me remind everyone that every single Senator on the other side of the aisle voted to let this destructive rule go forward. Now Americans and Nebraskans are paying the price for that vote.

Taking action 3 years ago would have been a very thoughtful step to avoiding disastrous consequences, but a surprise announcement caught everybody by surprise. Essentially 45 days to undo 3 years of ObamaCare damage, to protect people in their reelection, is not a serious policy effort. If a team is five touchdowns behind, they can't wait until there is 1 minute left to start playing. Let's face it. President Obama's announcement last week was not a policy decision. It was an attempt to arrive at a political fix to save reelection for members of his party. Once again he sidestepped Congress and the legislative process to unilaterally enact a temporary delay of one of his signature law's major provisions. Let me emphasize, it is temporary. It is only designed to get us past election day and to try to save some seats for his party.

Even if people believe that insurance companies and every insurance commissioner in 50 States can undo all of the planning they have done to comply with ObamaCare, to follow the rules—even if one assumes they can undo that in 45 days, our citizens will be back in the same boat next year after election day. The cancellation policies will again be printed. The replacement ObamaCare-approved policies will reveal skyrocketing prices, and our citizens will be back in the same lurch. The time for temporary fixes that shift the blame or delay the pain until the election is over needs to end.

While I will fight to eliminate this law's most burdensome provisions, the truth is that changes to this law create an avalanche of consequences. The provisions of this failed policy are so interconnected, so ill-fated, that no amount of amending and tweaking will solve the problems that American families and businesses are facing. We have only seen the tip of the iceberg. I believe full repeal is the only real answer for American families.

Congress can take a stand so millions of Americans can keep their doctors and keep the plans they like. We don't need a 2,700-page law and \$1 trillion in taxes to address the cost of health care or to help individuals with preexisting conditions.

Americans are demanding what they didn't get in 2010 and since this law

passed. They are demanding transparency. They are demanding thoughtful policy steps for a better, more efficient, and lower cost health care system. They want leaders who recognize we are not on the right track; we never have been with this law. It is time to head in a direction that puts Americans first, not political opportunity.

I believe this is a critical moment. I hope we seize upon this moment and do all we can to listen to the American people.

I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER (Ms. HEITKAMP). The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. BLUNT. I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### TRIBUTE TO STAFF

Mr. BLUNT. I rise to acknowledge Maj. Mark Shirley, serving as a Defense legislative fellow, and Robert Temple, an intern in my office. We have certainly benefited from both of them, particularly Major Shirley. He has been with our office for 1 year. This has been the first year I have been on both the Armed Services Committee and the Defense Appropriations Committee. Major Shirley's help in both of those cases has been exceptional. I am pleased we have had this benefit.

#### OBAMACARE

Mr. BLUNT. I want to talk a few minutes about what is happening with health care. I came to the floor last week to talk about individuals who were having problems. People are contacting our office. In fact, I suspect they are contacting 100 Senate offices every day expressing their concerns as they lose insurance.

At least 4.2 million Americans have now received cancellation notices on the insurance they had. I know last week the President made his proposal that apparently you could keep the insurance you like for 1 year if your insurance company will still offer it and if the State insurance commissioner will approve it. But those are two pretty big ifs and certainly nowhere close to "you can keep your insurance if you like it, period. If you like your doctor, you can keep your doctor, period." Neither of those is going to turn out to be the case. In fact, insurance commissioners immediately—their organization—said this is going to be practically very hard to comply with. So it is one of many problems.

I think the law that is most likely to apply with the Affordable Care Act will be the law of unintended consequences—consequences for individuals, consequences for people who had preexisting conditions and who in 35 States were being well served by some-

thing called the high-risk pool. Virtually all of those high-risk pools go out of existence on December 31. I know the Missouri high-risk pool goes out of existence on December 31, and the 4,300 people who depend on that for their insurance now have to find insurance on their own. They can get insurance through the exchange, but in all cases I have heard of so far, they will be paying more for their insurance on January 1 than they are paying for coverage today or will pay through the end of this year. So much for helping people with preexisting conditions. There was certainly a way to extend those high-risk pools, but we didn't do that.

This week I had a number of businesses talking about the problems they are having. I would like to briefly talk about two of them this morning. One of them is the Older Adults Transportation System in our State. It is headquartered near the middle of the State in Columbia, MO. It provides transportation for seniors, for people who are disabled, for low-income Missourians. Like many, the Older Adults Transportation System—called OATS—was notified that their current plan would be canceled on January 1. The rate for their new policy for their 50 full-time employees is going to be 40 percent higher on January 1 than the policy they have until December 31, and the only way they can do anything about that is to provide fewer services. So because of that 40-percent increase, fewer trips will be available to take the people they serve. Surely that wasn't the goal of the health care plan. They wanted to insure their driving staff. There are 600 drivers in that system; they wanted to insure them. They were actually hopeful, with all the promises about the Affordable Care Act, that they would be able to add their driving staff. Instead of adding their driving staff, they have to figure out what they are going to do with the 50 employees they have been insuring at rates that are now 40 percent higher than they were before.

Businesses around the State are calling. I recently heard from McArthur's Bakery in St. Louis. They currently have a 9-percent cap on a 2-year health policy. It is a qualified plan. Randy, the president of McArthur's Bakery, believes they have a pretty good plan. He thought their plan was a plan that should meet any standard they would hope to meet. It wasn't a rich plan. He described it to me as not a Cadillac plan but at least an Impala plan, and they thought the Impala was what they could do. Suddenly they have learned there is going to be a 4.4-percent increase in fees and taxes and a huge increase in the deductible. Their current plan has a deductible of about \$500 for an individual and \$1,250 for a family. The deductible on the new plan is going to be about \$3,500 for an individual and \$10,000 to \$12,000 for a family.

That is what I am hearing all the time, that the coverage may be broader, there may be things covered that